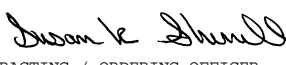


ORDER FOR SUPPLIES OR SERVICES

PAGE 1 OF

1. CONTRACT/PURCH. ORDER/ AGREEMENT NO. W912DW-04-P-0087				2. DELIVERY ORDER/ CALL NO. W912DW		3. DATE OF ORDER/CALL 2004 Jan 26		4. REQ./ PURCH. REQUEST NO. W68MD9-4012-7743		5. PRIORITY			
6. ISSUED BY USA ENGINEER DISTRICT, SEATTLE ATTN: CENWS-CT 4735 EAST MARGINAL WAY SOUTH SEATTLE WA 98134-2329				7. ADMINISTERED BY USA ENGINEER DISTRICT, SEATTLE SCOTT BRITT PH:206-764-3517 FAX: 206-764-6817 SCOTT.W.BRITT@US.ARMY.MIL SEATTLE WA		8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER (See Schedule if other)							
9. CONTRACTOR NOBLE EXCAVATING INC CHRIS NOBLE 103 COMMERCE WAY LIBBY MT 59923				10. DELIVER TO FOB POINT BY (Date) SEE SCHEDULE		11. MARK IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED							
14. SHIP TO SUPPLY & FACILITIES MGMT BR. 4735 E. MARGINAL WAY S. SEATTLE WA 98134-2385				15. PAYMENT WILL BE MADE BY US ARMY CORPS OF ENGRS FINANCE CENTER CEFC-AO-P 901-874-8556 5722 INTEGRITY DRIVE MILLINGTON TN 38054-5005		13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15							
16. TYPE OF ORDER DELIVERY/ CALL PURCHASE X				This delivery order/call is issued on another Govt. agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your quote dated 21-Jan-2004 Furnish the following on terms specified herein. REF:									
<p>ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED. SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</p> <p>NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYYYMMDD) _____</p> <p><input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:</p>													
17. ACCOUNTING AND APPROPRIATION DATA/ LOCAL USE See Schedule													
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/ SERVICES				20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT		22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE											
24. UNITED STATES OF AMERICA TEL: (206) 764-3203 EMAIL: susan.k.sherrell@usace.army.mil BY: SUSAN K SHERRELL				 CONTRACTING / ORDERING OFFICER				25. TOTAL \$59,560.00		29. DIFFERENCES			
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED _____ DATE SIGNATURE OF AUTHORIZED GOVT. REP.						27. SHIP NO.		28. DO VOUCHER NO.		30. INITIALS			
36. I certify this account is correct and proper for payment. _____ DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER						<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR			
						<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL						34. CHECK NUMBER	
37. RECEIVED AT		38. RECEIVED BY		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NO.		42. S/R VOUCHER NO.			